

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET <small>(FOR USE WITH FORM PTO-875)</small>							10/15/2000	SERIAL NO.	FILING DATE				
							APPLICANT(S)						
CLAIMS													
	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/	/	/	/	/	/	51	/	/	/	/	/	
2	/	/	/	/	/	/	52	/	/	/	/	/	
3	3	/	/	/	/	/	53	/	/	/	/	/	
4	2	/	1	/	/	/	54	/	/	/	/	/	
5	2	/	/	/	/	/	55	/	/	/	/	/	
6	2	/	/	/	/	/	56	/	/	/	/	/	
7	/	/	/	/	/	/	57	/	/	/	/	/	
8	/	/	/	/	/	/	58	/	/	/	/	/	
9	/	/	/	/	/	/	59	/	/	/	/	/	
10	/	/	/	/	/	/	60	/	/	/	/	/	
11	/	/	/	/	/	/	61	/	/	/	/	/	
12	/	/	/	/	/	/	62	/	/	/	/	/	
13	/	/	/	/	/	/	63	/	/	/	/	/	
14	/	/	/	/	/	/	64	/	/	/	/	/	
15	/	/	/	/	/	/	65	/	/	/	/	/	
16	/	/	/	/	/	/	66	/	/	/	/	/	
17	/	/	/	/	/	/	67	/	/	/	/	/	
18	/	/	/	/	/	/	68	/	/	/	/	/	
19	/	/	/	/	/	/	69	/	/	/	/	/	
20	/	/	/	/	/	/	70	/	/	/	/	/	
21	/	/	/	/	/	/	71	/	/	/	/	/	
22	/	/	/	/	/	/	72	/	/	/	/	/	
23	/	/	/	/	/	/	73	/	/	/	/	/	
24	/	/	/	/	/	/	74	/	/	/	/	/	
25	/	/	/	/	/	/	75	/	/	/	/	/	
26	/	/	/	/	/	/	76	/	/	/	/	/	
27	/	/	/	/	/	/	77	/	/	/	/	/	
28	/	/	/	/	/	/	78	/	/	/	/	/	
29	/	/	/	/	/	/	79	/	/	/	/	/	
30	/	/	/	/	/	/	80	/	/	/	/	/	
31	/	/	/	/	/	/	81	/	/	/	/	/	
32	/	/	/	/	/	/	82	/	/	/	/	/	
33	/	/	/	/	/	/	83	/	/	/	/	/	
34	/	/	/	/	/	/	84	/	/	/	/	/	
35	/	/	/	/	/	/	85	/	/	/	/	/	
36	/	/	/	/	/	/	86	/	/	/	/	/	
37	/	/	/	/	/	/	87	/	/	/	/	/	
38	/	/	/	/	/	/	88	/	/	/	/	/	
39	/	/	/	/	/	/	89	/	/	/	/	/	
40	/	/	/	/	/	/	90	/	/	/	/	/	
41	/	/	/	/	/	/	91	/	/	/	/	/	
42	/	/	/	/	/	/	92	/	/	/	/	/	
43	/	/	/	/	/	/	93	/	/	/	/	/	
44	/	/	/	/	/	/	94	/	/	/	/	/	
45	/	/	/	/	/	/	95	/	/	/	/	/	
46	/	/	/	/	/	/	96	/	/	/	/	/	
47	/	/	/	/	/	/	97	/	/	/	/	/	
48	/	/	/	/	/	/	98	/	/	/	/	/	
49	/	/	/	/	/	/	99	/	/	/	/	/	
50	/	/	/	/	/	/	100	/	/	/	/	/	
TOTAL IND.		↓	/	↓	↓		TOTAL IND.		↓				
TOTAL DEP.		←	10	←	←		TOTAL DEP.		←				
TOTAL CLAIMS			/				TOTAL CLAIMS						